PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

| Effective December 8, 2004 | | | | | | | | 10/57676/ | | | | |
|------------------------------------------------|------------------------------------------------|------------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------------|--------------------------|---------------------------------|---|---------------------|------------------------|----------------------------|------------------|------------------------|
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY TYPE | | OTHER THAN OR SMALL ENTITY | | |
| U.S. | NATIONAL S | STAGE FEES | | | | | | RATE | FEE | | RATE | FEE |
| BASIC FEE | | | | | | | 1 | BASIC FEE | | OR | BASIC FEE | 300 |
| EXAMINATION FEE | | | | | | | | EXAM. FEE | | | EXAM. FEE | 200 |
| SEARCH FEE | | | | | | | | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | | / 50 = | 1 | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | 17 minus 20 = * | | | | 1 | X \$ 25 = | | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | / minus 3 = * | | | | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PR | SENT | | | | 1 | + \$ 180 = | | OR | + \$ 360 = | |
| * If | the difference | e in column 1 is | less than ze | ero, enter "0" | ' in col | umn 2 | | TOTAL | | OR | TOTAL | 900 |
| | | (Column 1) CLAIMS REMAINING AFTER | AMENDE | HIGHE NUMBI | n 2) ST ER USLY | · (Column 3) PRESENT EXTRA |] | SMALL E | ADDI- TIONAL FEE | OR | OTHER SMALL E | |
| MENT | Total | * | Minus | PAID F | OR | = | 1 | X \$ 25 = | FEE | OR | X \$ 50 = | FLL |
| AMENDMENT A | Independent | * | Minus | *** | | = | 1 | X \$ 100 = | | OR | | |
| Ā | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | 1 | + \$ 180 = | | OR | | |
| | <u> </u> | | | | | • | j | TOTAL ADDIT. | | OR | TOTAL ADDIT. | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | <u> </u> | |
| ENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUMBI PREVIOL PAID F | ER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| AMENDM | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRES | SENTATION OF M | MULTIPLE DE | EPENDENT C | LAIM | | 1 | + \$ 180 = | · | OR | + \$ 360 = | |
| | | | | | | | • | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. | |
| * ** | If the "Highest No If the "Highest No | lumn 1 is less than th lumber Previously Pa lumber Previously Pa umber Previously Pai | iid For" IN THIS iid For" IN THIS | S SPACE is less S SPACE is less | than '20 than '3' | 0', enter "20". , enter "3". | | | | | | |